POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

| I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------------|-----------------------------|------------|-------------------------------------|------------------------------|
| I hereby appoint: | | | | | | | |
| Practitioners associated with the Customer Number: OR Practitioner(s) named below (if more than tan patent practitioner) | | | 25096 | | | Tustomer oumb | or must be readly |
| | | | | | | | |
| Name | | Registration Number | | | Name | | Registration Number |
| any and all palen | agent(s) to represent the undersigned tapplications assigned only to the upon in accordance with 37 CFR 3.73 | ndersigned acc | nited States Pat ording to the U | ent and Trad SPTO assign | lemark Off | fice (USPTO) in ords or assignme | connection with nt documents |
| Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: | | | | | | | |
| X The address associated with Customer Nur | | | 25096 | | | | |
| OR | | | | | | | |
| Firm or Individual Name | | | | | | | |
| Address | | | | | | | |
| City | ······································ | State | | | Zip | | |
| Country | | Telephon | 9 | | Email | | |
| Assignee Name and Address: Tian Holdings, LLC 2711 Centerville Road, Suite 400 Wilmington, Delaware 19808 | | | | | | | |
| A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. | | | | | | | |
| SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee | | | | | | | |
| Signature | 1 1 1 0 KIWWX | | > | Date Jan. 31, 2008 | | | |
| Name | Guy Províx | | | Telephone | | | |
| Title | Authorized Person | | | | | | |